

\_\_\_\_\_  
County where posted  
\_\_\_\_\_  
Name of Camp  
\_\_\_\_\_  
Date and Place of Birth  
\_\_\_\_\_  
Internment Serial Number  
\_\_\_\_\_  
Name (Last, first MI)

SENDER:

(Fold on this line)

PRISONER OF WAR MAIL LETTER

Language \_\_\_\_\_  
To \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_  
Country \_\_\_\_\_  
Province or Department \_\_\_\_\_

(Fold on this line)

DO NOT WRITE HERE

(Fold on this line)

DO NOT WRITE BEYOND HEAVY LINES